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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:) Group Art Unit: Unknown
CHANDER ET AL.)
SERIAL NO.: 09/480,013)
FILED: January 10, 2000) Examiner: Unknown
FOR: SYSTEM AND METHOD FOR)
PROVIDING INDICATION OF)
MAXIMUM PAYLOAD SIZE IN A)
WIRELESS TELECOMMUNICATION)
NETWORK)

Assistant Commissioner for Patents
Washington, D.C. 20231

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Technology Center 2600

Sir:

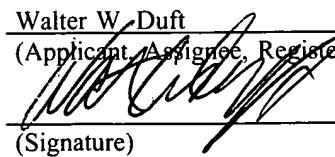
REQUEST FOR CORRECTED FILING RECEIPT

It has come to the attention of the undersigned attorney that the originally issued Filing Receipt is incorrect.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington D.C. 20231 on:

October 16, 2000
(Date of Deposit)

Walter W. Duft
(Applicant, Assignee, Registered representative)

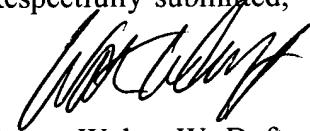

(Signature)

October 16, 2000
(Date of Signature)

The undersigned attorney has been advised that the Filing Receipt was mailed to the corporate address of Applicants' assignee and does not list the undersigned attorney as the corresponding attorney of record.

Please correct the records in the Patent and Trademark Office and issue a corrected Filing Receipt to the undersigned attorney.

Respectfully submitted,



By: Walter W. Duft
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Bib Data Sheet

SERIAL NUMBER 09/480,013	FILING DATE 01/10/2000 RULE	CLASS 455	GROUP ART UNIT 2749	ATTORNEY DOCKET NO. CHANDER6-5
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APPLICANTS

SHARAT SUBRAMANIYAM CHANDER, WOODBRIDGE, IL ;
 SHIV MOHAN SETH, NAPERVILLE, IL ;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 02/16/2000**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	IL	10	42	6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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TITLE

SYSTEM AND METHOD FOR PROVIDING INDICATION OF MAXIMUM TELESERVICE PAYLOAD SIZE IN A WIRELESS COMMUNICATION NETWORK

FILING FEE RECEIVED 1320	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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